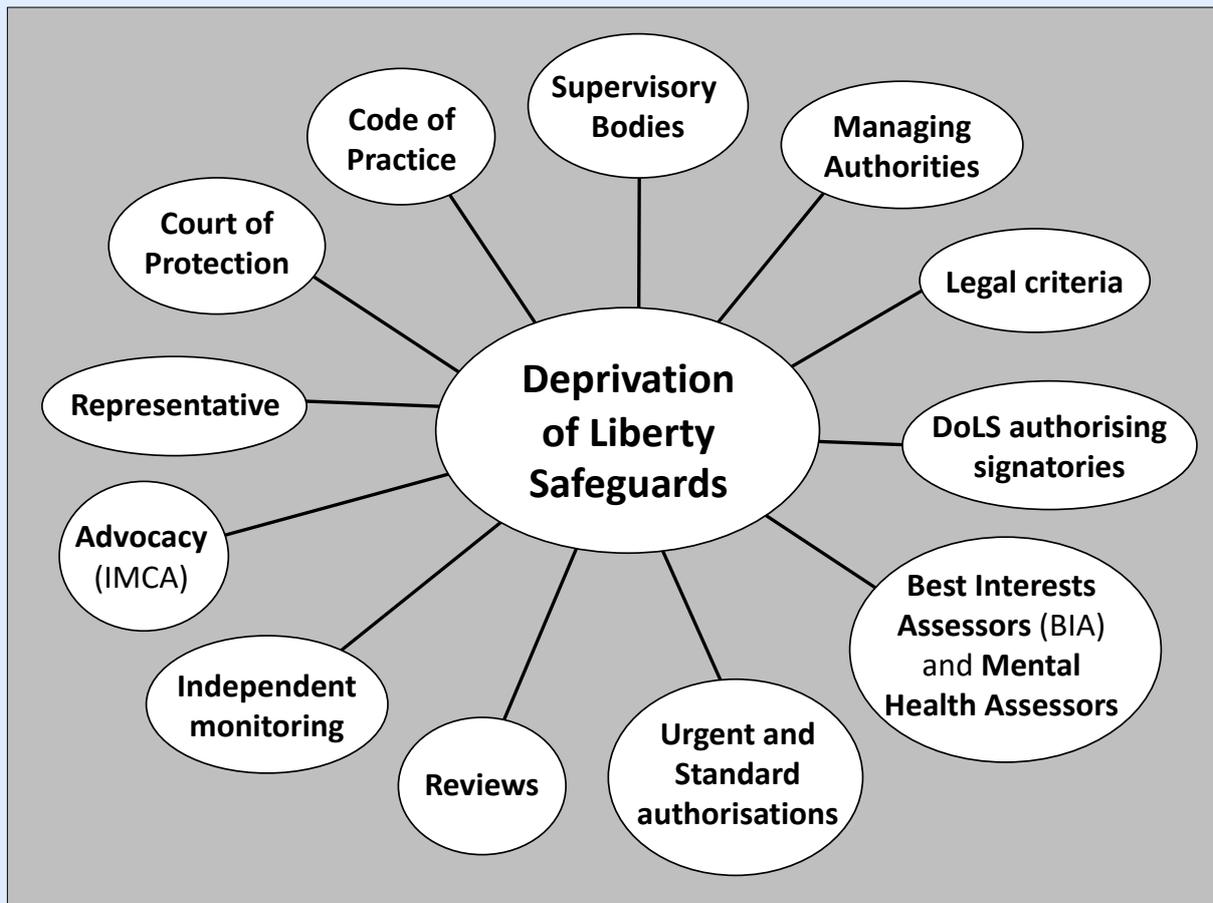


## DoLS: Key Elements



- **Supervisory bodies** – the legal body responsible for assessing and authorising a standard DoLS. supervisory bodies have a series of legal duties placed upon them. In England this will be a local authority whilst in Wales it is either a Health Board or local authority (see chapter *The Supervisory Body*).
- **Managing authorities** – this is either a registered care home, nursing home or hospital where the person is deprived of their liberty. Managing authorities have a range of duties under the Act (see chapter *The Managing Authority*).
- **Legal criteria** – for a standard DoLS authorisation to be given, certain legal criteria must be assessed and then authorised by the supervisory body (see chapter *Standard DoLS authorisations: the assessments*).
- **DoLS Authorising Signatories** – a DoLS authorising signatory must scrutinise the assessments completed for a standard DoLS authorisation and confirm on behalf of the supervisory body they are acceptable before the authorisation can be given (see chapter *The Supervisory Body*).
- **Best Interest Assessors and Mental Health Assessors** – specially qualified independent professionals that are required to complete the DoLS assessments and confirm the legal criteria are met (see chapter *The assessors*).
- **Urgent and Standard authorisations** – there are two types of DoLS authorisations. Urgent authorisations are initially completed by managing authorities themselves (care home or hospital) and have a limited duration of 7 days but can be extended by the supervisory body to 14 days. Standard authorisations are completed by supervisory bodies and can last up to 12 months at a time (see chapters *Urgent DoLS authorisations and Standard DoLS authorisations*).
- **Reviews** – a standard authorisation can be reviewed at any time by either a Best Interests Assessor or a Mental Health Assessor. This is often referred to as a Part 8 review. The Act includes a series of triggers for having such reviews (see chapter *Part 8 reviews*).

- **Independent monitoring** – a legal duty on independent inspection bodies to monitor and report on DoLS. The inspection bodies for England and Wales are different (see chapter *Monitoring DoLS*).
- **Advocacy (IMCA)** – the right to free independent advocacy for everyone under DoLS and also their Representative (see chapter *Advocacy (IMCA)*).
- **Relevant Person's Representative (RPR)** – a family member or friend who may be appointed by the supervisory body to support and represent the person whilst the DoLS is in place. If no one is appropriate, a paid relevant person's representative (PRPR) will be appointed (see chapter *The Relevant Person's Representative*).
- **Court of Protection** – a free independent right of appeal at any time to a judge in the Court of Protection by the person themselves or their representative. Their advocate (IMCA) or others can also appeal (with permission from the court) (see chapter *The Court of Protection*).
- **Code of Practice** – a statutory code on DoLS that includes practical guidance on its operation. Staff have a legal duty to have 'regard' to the Code (see chapter *Codes of Practice*).

### **Liberty Protection Safeguards**

Many of the key parts of DoLS listed above remain with the introduction of LPS. Although some names are changed, the function and role remain similar. In summary:

**Supervisory Bodies** – like DoLS but the name changes to responsible body and will also include CCGs (NHS ICS) and NHS Trusts.

**Managing authorities** – are removed.

**Legal criteria** – will remain and are very similar to the DoLS legal criteria.

**DoLS Authorising Signatories** – their name changes to pre-authorisation reviewers but the role remains very similar.

**Best Interest Assessors and Mental Health Assessors** – in relation to carrying out assessments both roles end. BIAs may convert to a new reviewer role called the Approved Mental Capacity Professional (AMCP).

**Urgent and Standard authorisations** – the terms 'urgent' and 'standard' authorisation will no longer exist. There will just be one type of LPS authorisation. Urgent cases will be dealt with under a new Section 4B of the Mental Capacity Act 2005.

**Reviews** – these remain and under LPS there must also be a pre-determined number of regular reviews during the authorisation period.

**Independent monitoring** – the same as DoLS but as LPS starts from the age of 16, Ofsted and Estyn (Wales) are added to the existing monitoring bodies.

**Advocacy (IMCA)** – a similar right to DoLS but with diluted legal criteria.

**Representative** – a similar right to DoLS, but with diluted legal criteria plus the name changes to the Appropriate Person.

**Court of Protection** – the same as DoLS.

**Code of Practice** – a new single Code of Practice for the Mental Capacity Act that will include information on LPS. This is due to be published a few months before the start of LPS.

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